PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003										10770892					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	EN	זוזץ ⊐	OR	OTHER			
TOTAL CLAIMS			33		·			RATE	T	FEE		RATE	FEE ·		
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			33 minus 20=		. /3			XS 9:			OR	X\$18=	234		
INDEPENDENT CLAIMS			≤ minus 3 =		. 2			X43=			OR	X86=	172		
MULTIPLE DEPENDENT CLAIM P			RESENT					+145=			OR	+290=			
* If the difference in column 1 is tess than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1176			
CLAIMS AS AMENDED - PART II									_	<del></del>	,	OTHER			
12-12-05 (Column 1) (Column 2) (Column 3							SMAL	L EI	NTITY	OR	SMALL	ENTITY			
AMENOMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 36	Minus	- 3	3	-3		X\$ 9=			OR	X\$18=	150		
	Independent	. 6	Minus		5_			X43=	T		OR	X <del>00</del> =	200		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	T		OR	+290=			
7-5-06 (Column 1) (Column 2) (Column 3)									4			TOTAL ADDIT, FEE	350		
									E <b>L</b>			ADDII. PEEI			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞH NUME PREVIO PAID I	EST BER FUSLY	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 36	Minus	* ~	6	• 4	- [	X\$ 9≈			OR	X\$18=			
	Inospendent	. 6	Minus	***	6	0		X43=	T		OR	X86=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=			OR	+290=	Ø.		
							A	TOTA DDIT. FE			OR ,	TOTAL ADDIT. FEE			
		(Column 1)		(Colum		(Column 3)	٠ ـ								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	П	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE		
	Total		Minus	8		è		X\$ 9=			OR	X\$18=			
	Independent	•	Minus	rion.				X43=	T		OR	X86=			
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT	CLAIM			+145=	T			+290=			
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.															
-	the "Highest Nur	nber Previously Pa mber Previously Pa ber Previously Paid	id For IN THIS	S SPACE is	less tha	n 3, enter "3."		DOIT. FEE	: L			VOOIT. FEE			

Application or Docket Number